



Prospectus for Specialty Registrars in Public Health



Children and Families

Community Services

Mental Health

Secure Services

Specialist Services





Welcome...



Welcome to this training prospectus which gives you an overview of Lancashire Care NHS Foundation Trust and how we can provide you with an excellent training placement.

This trust exists to support the health and wellbeing of local people by providing high quality holistic services that meet a wide range of physical and mental health needs.

We are committed to providing services that recognise the interaction between a person's mental and physical health. We can do this because we provide such a wide range of services, across a wide geographical area, beyond Lancashire in some cases.

We initiated the public health function in 2014, and since then have implemented some key public health interventions. For example the making every contact count programme provides physical health knowledge to staff working in mental health services, and knowledge about mental health and well-being to staff working in physical health services. The medical director chairs the whole person health group which oversees this work.

We recognise the importance of research in service provision and so there are opportunities to develop academic skills, by getting involved in research projects. Much of our work is across multiple organisations so we also offer opportunities to develop leadership skills in an innovative public health setting. For example, the trust is one of a small number of mental health trusts implementing NICE smokefree guidance.

We hope you will consider continuing your public health training here.

Professor Heather Tierney-Moore, Chief Executive Professor Max Marshall, Medical Director

What's in this prospectus...

This prospectus is in four sections. Section one provides an overview of the services provide by LCFT. It shows the scale and scope of the context in which you could achieve your learning outcomes.

Section two describes the trust's vision and values. This is integral to how we organise ourselves and deliver our objectives.

Section three is written by Suzanne Gilman, the first StR to work here. She provides an insight into her experience working here. She also highlights that this placement is only suitable for those who are post Part B.

Finally section four lists the type of projects that are available and the learning outcomes that could be achieved.

I'd be delighted to discuss your training opportunities at LCFT with you. Please email me on jane.beenstock@lancashirecare.nhs.uk or telephone on 01772 773513.

Jane Beenstock
Consultant in Public Health

1. Trust services

First established in 2002, Lancashire Care NHS Foundation Trust (LCFT) is the only provider of health and wellbeing services that covers the whole county of Lancashire. The Trust's focus is on providing integrated care to the 1.5 million people that live in Lancashire, which is tailored and responsive to local need. The Trust specialises in mental health and secure provision.

The Trust employs 6,650 members of staff and has an annual turnover of over £325 million. Historically a provider of mental health services, the Trust now offers a wide range of health and wellbeing services with over half of the Trust's income relating to community and specialist services.

The majority of the Trust's services are commissioned by local Clinical Commissioning Groups (CCGs). Other sources of income for the Trust come from the provision of specialist services, which are commissioned by NHS England and services commissioned by the local authorities.

The CCGs share boundaries with Lancashire County Council social services with the exception of Blackburn with Darwen, and Blackpool which align to their respective unitary authorities.

Research and Development

The Trust continues to play a major role in supporting research and innovation and is dedicated to improving the health of its patients, service users and the local population through developing and participating in high quality research and supporting new innovations. Developing an active research culture brings a host of benefits for service users, patients, clinicians and the NHS as a whole. It drives innovation, gives rise to better and more cost-effective treatments and creates opportunities for staff development.

Additionally, it enables Trust clinicians to stay abreast of the latest treatment possibilities and the evolving evidence base and active participation in research leads to improved patient outcomes.

The Trust supports the Research and Development Department and Innovation Department to work closely with clinicians and internal and external researchers to develop and deliver a range of research studies and increase the number of service users and patients participating in research each year. During 2014-15, the Trust was able to offer over 100 different clinical research studies to patients with more than 1,400 service users and patients participating in quality-assured research.

The Trust has increased the number of commercial clinical drug trials from five studies in 2013/14 to six in 2014/15, thereby increasing the number of patients who can access novel treatments. The Trust has plans to expand access to clinical trials for dementia and mental health service users as well as rheumatology patients in the forthcoming year.

Innovation

Innovation is about taking a new approach to work which will result in an improvement in quality, a reduction in cost and/or a time saving. Over a year ago the Trust launched its Innovation Incubator to promote a shared culture and understanding of innovation. Throughout the year staff have submitted their own ideas for innovation and been supported to develop these in a safe and supportive environment. As the Incubator has matured it has encouraged staff to network at monthly innovation breakfasts which have attracted colleagues from the Commissioning Support Unit, DAC Beachcroft, Lancaster University, UCLan, NWC AHSN and Lancashire MIND. A recent project with Lancaster University and Health Education North West has identified a range of staff development activities that will be needed to support the NHS agenda on health care 'innovation and improvement'.

Some of the ideas that have been developed through the Innovation Incubator include:

- Development of a Hydration Toolkit for care homes using video animation and behavioural insights to increase adoption
- Creation of a video animation to support full implementation of the Trust's Nicotine Management Policy
- Providing tablet computers and applications for service users at The Harbour and the Specialist Rehabilitation Service to promote social inclusion
- Securing funding for the REACH Programme and providing on-going support
- Interactive video role-playing in sexual health education
- Collaborating with Cumbria Clinical Commissioning Group by implementing a coordinated approach to patient transitions in South Cumbria and North Lancashire
- Support for the Delivering the Strategy Programme.

2. LCFT's vision and values

The values represent what we as an organisation, and the individuals who make up that organisation, are about.

It is our aim that everything we do fits in with, and reinforces, these values:

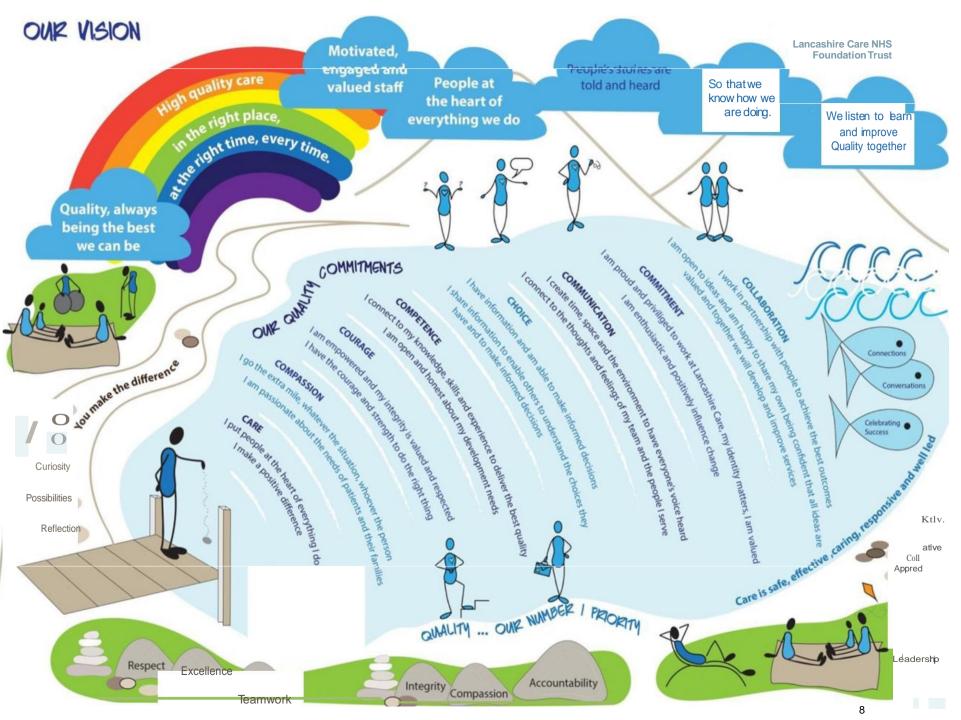
- Teamwork share it
- Compassion offer it
- **Integrity** show it
- Respect earn it
- Excellence reach for it
- Accountability accept it

We are true to our values by:

- Treating people with dignity and respect
- Caring for each other and showing compassion
- Remaining professional at all times
- Dressing smartly and appropriately
- Ensuring that our work areas are clean and tidy
- Working effectively with partners
- Sharing good practice and celebrating success
- Being appreciative focusing on the positives and what is working well
- Taking responsibility for the standard of care or service that you provide
- Taking positive action to make improvements where you see the need







Priorities – Quality is no. 1



High quality care, in the right place, at the right time, every time.



To provide high quality services

We will ensure that people who use our services are at the heart of everything we do, and the people who deliver and support delivery of services are motivated, engaged, and proud to provide high quality, compassionate, continually improving care. We will empower people to share their stories so that we know how we are doing and we will listen to learn and to improve quality together. We will continue to strive to be the best that we can be by upholding our 8 quality commitments and the 'I' statements, empowering everyone to embrace these personal pledges, for example

'I connect to my knowledge, skills and experience to deliver the best quality.'

'I have the courage and strength to do the right thing.'

'I go the extra mile, whatever the situation, whomever the person.'



We will deliver joined up care, reduce waiting times and deliver good outcomes for people.



We will work in partnership with GPs and people will recommend us.



People want to work here because they are supported, well led and able to reach their potential.



We will provide great value for money.



We will innovate and use technology to improve services for our patients.

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3. A specialty registrar's perspective...

As a senior registrar I was looking for a placement that could offer something slightly different in my penultimate year of training. Lancashire Care has been a great opportunity to gain new knowledge and skills in an NHS healthcare provider organisation.

In this placement registrars can get involved in providing leadership for large scale programmes to more discrete project based work such as carrying out literature reviews or health needs assessments. The Trust is very research focused with lots of opportunities to develop your academic interests with strong links to local universities. There is also a library and resource centre with a library team on hand to support you with your research project.

I have been with the Trust for just under 12 months and during that time I have been leading and supporting various programmes of work. The Making Every Contact Count (MECC) programme has involved collaborating with the University of Manchester to develop staff e-learning resources on behaviour change approaches. More recently I had the opportunity to present the Trusts work on MECC at a national PHE conference. I have also worked with colleagues to establish a community of purpose group to support the Trusts developing parity of esteem agenda. This work has involved developing systems for sharing results of physical health checks between services in primary and secondary care.

LCFT has a small public health team and you will work fairly independently. The placement is therefore best suited to registrars who have passed both part A and B exams. I have found the Trust to be a welcoming and supportive environment for training and would recommend this to colleagues as a placement.

Suzanne Gilman Specialty Registrar

4. Training Opportunities at Lancashire Care NHS Foundation Trust

4.1 Illustrative projects

Types of training opportunity

Specific public health interventions. LCFT is in the process of developing and implementing a trust-wide Making Every Contact Counts approach. There is potential for registrars to be involved in this work in a range of ways including reviewing the evidence-base, evaluation, delivery, engaging with staff and patients, and delivering a complex piece of work.

Learning outcomes that could be addressed

- 1.8 Undertake an assessment of the health impact of a policy or project for a defined population and demonstrate that this work has been considered at a high level in a relevant organisation
- 2.1 Generate an appropriate question in order to assess the evidence
- 2.2 Use health and non-health evidence from formal research and other sources to answer a defined question, taking into account relative strengths and weaknesses of evidence used
- 2.3 Make use of others in finding and retrieving evidence (e.g. librarians, information specialists)
- 2.4 Define a literature search strategy with appropriate inclusion and exclusion criteria to find relevant evidence to answer a question
- 2.5 Clearly document methods used in finding and retrieving evidence
- 2.6 Filter and refine searches to select appropriate evidence, incorporating the hierarchy of evidence
- 2.7 Use an appropriate framework to critically appraise evidence
- 2.8 Formulate a balanced, evidence-based recommendation explaining key public health concepts using appropriate reasoning, judgement and analytic skills in a public health setting
- 2.9 Provide options for decision makers
- 2.10 Communicate recommendations orally and in writing in order to influence
- 3.8 Develop a plan to secure the resources required to implement a strategy successfully
- 3.9 Overcome problems that arise when implementing a plan or strategy
- 4.10 Demonstrates an understanding of how to use different methods of financial management
- 4.11 Guide and support staff, monitor work, receive, give constructive feedback and develop staff
- 4.12 Balance the needs of the individual, the team and the task
- 4.13 Analyse appropriately a situation or project and identify the steps required to achieve change
- 4.19 Work in partnership with other agencies on problems of high complexity
- 4.20 Work collaboratively with the media to communicate effectively with the public

- 5.7 Influence a community development project or action demonstrating understanding of relationships with the community and community development staff including issues of power and politics
- 5.8 Apply the theoretical models of behaviour change for the general population and high risk/ hard to reach groups
- 5.10 Play an active role in engaging the public in solving their own health problems
- 5.13 Lead or make a significant contribution to a major public health media campaign demonstrating an understanding of appropriate theory and applications of social marketing and mass communication
- 7.13 Model and project the impacts of the introduction of new services, technologies and treatments
- 7.15 Carry out an appraisal of the quality and outcome of an under-performing care or provider area and report back with recommendations for action to relevant multi-disciplinary management forum
- 9.6 Use one or more research methods to support work undertaken in a service or research setting, disseminating findings appropriately
- 9.7 Identify the potential for misleading findings from different research methods and identify ways to avoid them

The trust provides limited health improvement services and there are opportunities for registrars to undertake projects in this area.

- 4.8 Manage a project to successful completion within available resources and timescales
- 4.9 Demonstrates effective team working in a variety of settings
- 4.11 Guide and support staff, monitor work, receive, give constructive feedback and develop staff
- 4.12 Balance the needs of the individual, the team and the task
- 4.14 Display leadership within a team and a multi-agency setting
- 4.15 Handle uncertainty, the unexpected, challenge and moderate levels of conflict in an appropriate and sensitive manner including communicating effectively in a potentially hostile or emotive situation.
- 4.20 Work collaboratively with the media to communicate effectively with the public
- 5.4 Assess and communicate the need for health improvement in a defined community, presenting a case for action/inaction in response to the presenting health problem
- 5.6 Evaluate a health improvement intervention, defending outcomes and methods chosen, identifying strengths and limitations of intervention, communicating findings and making recommendations

- 5.8 Apply the theoretical models of behaviour change for the general population and high risk/ hard to reach groups
- 7.1 Evaluate and audit services to assure and improve quality.
- 7.2 Design and implement data collection for a defined service question and integrates data outputs with other routinely available and relevant data

There are opportunities to be involved in the implementation of public health guidance such as smoke free environments. The Trust is committed to full implementation of NICE PH48. This work began at the start of 2015 and there are still aspects of implementation such as communication of complex concepts, and changing staff behaviour, that could provide training opportunities.

- 2.17 Work with others to generate consensus where there is conflicting evidence or an evidence gap
- 2.18 Use evidence-based recommendations to influence decisions
- 5.12 Apply understanding of a range of organisations and their different cultures and perspectives to bring about effective health improvement activity
- 7.3 Critically appraise a business case or cost/budget assessment for a new service development or configuration from either a provider or commissioner perspective
- 7.6 Critically appraise a business case or cost/budget assessment for a new service development or configuration from either a provider or commissioner perspective
- 7.10 Apply the results of a healthcare needs assessment for a relevant local population or community leading to service development
- 7.16 Design and co-ordinate a multi-trust or cross organization audit or evaluation of a clinical or service area or topic including the development and assessment of guidelines
- 7.17 Set up a service review and leads change management process if needed
- 9.6 Use one or more research methods to support work undertaken in a service or research setting, disseminating findings appropriately
- 9.8 Draw appropriate conclusions and make recommendations from others' research

Developing public health at a strategic level would be experienced through the trust's whole person health group, which has representatives from across the trust, to address parity of esteem issues. There are opportunities for registrars to be involved in this work as it develops, including taking forward work with external stakeholders within the local health economy.

- 4.18 Identify and engage relevant stakeholders for a project to improve public health
- 5.9 Influence professional groups outside public health in giving advice to and making brief interventions with patients/clients on health behaviour issues.
- 5.12 Apply understanding of a range of organisations and their different cultures and perspectives to bring about effective health improvement activity

Service transformation and pathway redesign. Specialty registrars could be involved in specific pieces of work to bring a population perspective to all of the services that LCFT provide.

- 4.8 Manage a project to successful completion within available resources and timescales
- 4.9 Demonstrates effective team working in a variety of settings
- 4.10 Demonstrates an understanding of how to use different methods of financial management
- 4.11 Guide and support staff, monitor work, receive, give constructive feedback and develop staff
- 4.12 Balance the needs of the individual, the team and the task
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- 4.14 Display leadership within a team and a multi-agency setting
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- 5.7 Influence a community development project or action demonstrating understanding of relationships with the community and community development staff including issues of power and politics

Public health intelligence. As a provider organisation, our performance teams gather significant information which is relevant to public health. Registrars could use this opportunity to undertake projects using this date to inform service delivery and evaluate services.

- 1.5 Use a range of routine information sources and surveillance systems including, as a minimum, mortality, hospital admission, census, primary care, communicable disease, cancer intelligence data, reproductive and sexual health data, and government surveys to support public health activity
- 1.7 Undertake a health needs assessment for a defined population for a specific purpose and demonstrate that this work has been considered at a high level in a relevant organisation
- 8.2 Organise data, meta-data, information and knowledge (knowledge management including libraries)
- 8.3 Appraise the validity and relevance of data and data systems in order to assess their quality and fitness for purpose
- 8.5 Present and communicate population health intelligence in effective ways in order to monitor system performance and to improve decisions of colleagues, practitioners and senior decision makers

All projects in this Trust are likely to include networking and establishing relationships with external organisations. Specialty registrars could shadow this work and undertake some networking independently. Much of our work is done collaboratively and there would be value to registrars in being involved in this. Our work involves influencing without positional authority so this is a good placement to learn these skills.

- 4.3 Use effective and appropriate leadership styles in different settings and organisational cultures taking account of the differences between elected and appointed roles
- 4.4 Develop a vision and communicate that effectively to other key stakeholders
- 4.7 Demonstrate appropriate listening communication skills in a typical public health setting
- 4.14 Display leadership within a team and a multi-agency setting
- 5.12 -Apply understanding of a range of organisations and their different cultures and perspectives to bring about effective health improvement activity
- 9.11 -Help the public to be aware of and understand health issues
- 9.12 Contribute to the education and training of other staff, medical students and colleagues.

4.2 Specific Projects Currently Available (October 2016)

Is the Trust's literature about the smokefree initiative fit for purpose?

- Identify a suitable framework or set of standards for the review.
- Review the leaflets for staff and/or service users against these criteria. Could also conduct focus groups.
- Make recommendations about content and format for future leaflets.

What are the three key messages that should be promoted to the public about the impact of stopping smoking on mental health? (myth buster)

- Review the literature and identify the most important facts.
- Test out the facts with members of the public.
- Write the most salient facts in accessible language.
- Explain in words annut pictures the impact of nicotine on the brain.

Activities to develop a support package for doctors about the nicotine management policy

- 1. A literature review of attitudes and views of medical staff about stopping smoking in mental health in-patient units. This would provide a summary of medical staff views that can be used to inform an educational package that will mobilise the medical workforce to take action on this issue.
- 2. Focus groups with medical staff to identify what would help and hinder them when implementing NICE guidance PH48. And/or use the theory of domain framework, adapting existing questionnaire. This would need a literature review to see how this questionnaire has been updated. The output would be a list of recommendations for an educational package that will mobilise the medical workforce to take action on this issue.
- An e-learning package for doctors that supports them in their implementation of NICE guidance PH 48 in mental health settings is required. Write a script for an elearning package that covers:
 - Impact of stopping smoking on mental health
 - Sample conversations to have with service users
 - How to prescribe and advocate use of NRT
 - Impact of stopping smoking on other medication

¹ What helps and hinders midwives in engaging with pregnant women about stopping smoking? A cross-sectional survey of perceived implementation difficulties among midwives in the North East of England Jane Beenstock¹, Falko F Sniehotta^{1*}, Martin White¹, Ruth Bell¹, Eugene MG Milne²³ and Vera Araujo-Soares http://www.implementationscience.com/content/7/1/36

- 4. Write a summary of the key points about the nicotine management policy and NRT for doctors. This could be a leaflet or flowchart given to all doctors at induction.
- 5. Make a video with the following content.......
 - Introduction from medical director why this is important to our role as doctors
 - Slides with some facts about tobacco and people with a mental health condition. Plus impact on stroke risk because of other medication. Metabolic syndrome.
 - Section on prescribing NRT (slides that have already been produced and voiceover, or film one of smoking cessation team)
 - Something about service users expect to be asked, maybe voice of service user, use one of the stories from the board meeting
 - Pharmacist talking about impact on other medication and consequent prescribing changes
 - Doctor talking about section 17 leave
 - MM there are three options to offer on admission, always write NRT prescription, even if not taken up at start.
- 6. Write and produce a 10/15 minute explanatory animation suitable for a lay audience about how a nicotine addiction works and why NRT helps. Research and write a script, with graphics, that explains in lay person language:
 - The mechanisms in the brain that change as a result of nicotine addiction
 - How the illusion of calm is created by having a cigarette
 - How mental health is improved with managing addiction to nicotine (addressing the myth it gets worse)

Making every contact count

As part of the Making Every Contact Count (MECC) programme, LCFT are working with the University of Manchester to develop e-learning resources for staff development on behaviour change and specialist topics. There is an opportunity for a registrar to support this programme by developing content for an e-learning package on specific topics including: addressing health behaviours in individuals at high risk of metabolic syndrome; implementing the Lester Tool.